Under the Panerwo	rk Reduction Ast at 400	·	Appro U.S. Palent and Tradema	ved for use through 7/31/200	PTO/SB/06 (08-
PAT	ENT APPLICATION	persons are required to resp FEE DETERMINAT		ved for use through 7/31/200 rk Office; U.S. DEPARTMEN 1 unless il displays a valid Ol Application of Rocke	MB control numb
	. Substituti	10r Form P1O-875		10/04	2967
-	CLAIMS AS FILED - (Column 1)	PART I (Column 2)	SMALL ENTITY	OTH OR SMA	IER THAN LL ENTITY
FOR BASIC FEE	NUMBER FILED	NUMBER EXTRA	RATE FEE		1
(37 CFR 1.16(a)) TOTAL CLAIMS		· · · · · · · · · · · · · · · · · · ·	s	OR NATE	FEE
(37 CFR 1.16(c)) INDEPENDENT CLAIMS	minus 20 =		× s =	OR X \$ =	*== -
(37 CFR 1.16(b))	minus 3 =		X \$=	OR X \$ =	-
MULTIPLE DEPENDENT		R 1.16(d))	+ \$=	OR +5 -	
' If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL	OR TOTAL	
	MS AS AMENDED - P.	ARTII		- TOTAL	L
HINE.	Column 1) (0	Column 2) (Column 3)	CHALL TAIL	OR OTHER	R THAN
A R	CLAIMS HI	GHEST UMBER PRESENT	SMALL ENTITY	SMALL	ENTITY
	AFTER PRE	VIOUSLY EXTRA	RATE ADDI- TIONAL	RATE	ADDI- TIONAL
Z Independent	Minus "	32 = -	X \$ FEE		FEE
(37 CFR 1,16(b))	Minus	3 -	x s =	OR XS	
FIRST PRESENTATION	OF MULTIPLE DEPENDENT CLA	IM (37 CFR 1.16(d))	+ \$ =	OR X \$ =	1
•			TOTAL ADD'L FEE	TOTAL	-
	411.40	lumn 2) (Column 3)	- 	OR ADD'L FEE	
REN AI	IA MINIO		RATE ADDI- TIONAL	RATE	ADDI-
Total (37 CFR 1.16(c))	Minus	=	FEE		TIONAL FEE
Independent (37 CFR 1 15(b))	Minus	=	X \$ =	OR X \$	
FIRST PRESENTATION OF	MULTIPLE DEPENDENT CLAIM	(37 CFR 1.16(d))	+ \$ =	OR X \$=	
			TOTAL ADD'L FEE	OR + \$ =	
(Colum	Colum	n 2) (Column 3)	YOU'LEE	OR ADD'L FEE	
CLA REMAI	MS HIGHE NING NUMBE	ST PRESENT	0.75		
Total (37 CFR 1.16(c))	ER PREVIOU	SLY EXTRA .	RATE ADDI- TIONAL FEE	RATE	ADDI- IONAL FEE
Independent (37 CFR 1.16(b))	Minus · ***		(\$	OR X \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			(\$=	OR X \$=	
	CONTRACT COMME		\$ = O	OR + \$=	
the "Highest Number De-	ss than the entry in column 2, riously Paid For' IN THIS SPA iously Paid For' IN THIS SPA	A. write "0" in column 3. CE is less than 20, enter "	DO'L FEE O	TOTAL R ADD'L FEE	
he "Highest Number Previo	viously Paid For IN THIS SPA iously Paid For IN THIS SPA pusly Paid For (Total or Indep puriting by 37 CFP 116 The	CE is less than 3, enter *3*,	per found in the appropriate box		

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.